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## JAN 28 2008

PTO/SB/21 (09-04)

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	Application Number	10/522,624
TO A MOSSITT AT	Filing Date	October 3, 2005
TRANSMITTAL	First Named Inventor	Stuart Goodridge
FORM	Art Unit	3679
(to be used for all correspondence after initial t	Examiner Name	David Bochna
	6 Attorney Docket Number	33025-400700
Total Number of Pages in This Submission		
	ENCLOSURES (Check all that apply	
Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences
Amendment/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
After Final	Petition to Convert to a Provisional Application	Proprietary Information
Affidevits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter Other Enclosure(s) (please identify
Extension of Time Request	Terminal Disclaimer	below):  Certificate of Facsimile.
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Information Disclosure Statement	CD, Number of CD(s) Landscape Table on CD	
Certified Copy of Priority Document(s)	Remarks	
Response to Missing Parts/ Incomplete Application	In the event any further fees are nec authorized to debit Deposit Account	cessary to be paid, the Commissioner is No. 19-1351
Response to Missing Parts under 37 CFR 1.52 or 1.53		·
SIGNA	TURE OF APPLICANT, ATTORNEY,	OR AGENT
im Name 27717		
Signature	4/0	
Printed name Joseph H. Herren	/- 8	
	Tr	Reg. No. 53,019
Date January 28, 2008		
C	ERTIFICATE OF TRANSMISSION/M/	AILING
hereby certify that this correspondence is be sufficient postage as first class mail in an envithe date shown below.	eing facsimile transmitted to the USPTO or deposelope addressed to: Commissioner for Patents,	sited with the United States Postal Service with P.O. Box 1450, Alexandria, VA 22313-1450 on
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		Date January 28, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USP10 to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete the complete by 55 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete the complete the complete the USP10. Time will vary depending upon the individual case. Any comments on the gathering, preparing, and submitting the complete this torm and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-07)
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Complete if Known   File Considered Appropriations Act. 2006 (H.R. 4818).   FEE TRANSMITTAL   FROM SMITTAL   From FY 2008   First Named Inventor   Stuart Goodridge   Stuart Goodridge   Examiner Name   David Bochna   JAN 2   Applicant claims small entity status. See 37 CFR 1.27   Art Unit   3679	trol numb
FEE TRANSMITTAL For FY 2008    Applicant claims small entity status. See 37 CFR 1.27	
FIRST Named Inventor Stuart Goodridge CENTIFICATION Applicant claims small entity status. See 37 CFR 1.27  Art Unit 3679  TOTAL AMOUNT OF PAYMENT (\$5120.00 Attorney Docket No. 33025-400700  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 19-1351 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fea Under 37 CFR 1.16 and 1.77  WARRING: Information on this form may become public. Credit card information about not be included on this form. Provide credit card information and sufficient authorization on PTO-2008.  FILING FEES  FILING FEES  SEARCH FEES  EXAMINATION FEES  FILING FEES  SIMILEDITY  Application Type Fee (\$) Fe	HVE
FOR FY 2008    First Named Inventor   Stuart Goodridge   Examiner Name   David Bochma   JAN 2	AX CE
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Charge any additional fee(s) or underpayments of fee(s)  Under 37 CFR 1.16 and 1.17  VARRING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.  FEE CALCULATION  I. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Application Type  Fee (\$) Fe	
Application Type  Fee (\$)  Fee (\$)  Fee (\$)  Fee (\$)  Provisional  210  105  105  210  105  210  105  210  105  210  105  210  210	
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Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Pees Paid (\$)  HP = highest number of total claims paid for, if greater than 20  Indep. Claims  Extra Claims  Extra Claims  Fee (\$)  Fees Paid (\$)  Fees Paid (\$)  Total Claims  Fee (\$)  Fees Paid (\$)  Fee Paid  APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Fee (\$)  Fees Paid (\$)  Fees Paid (\$)  Fee Paid (\$)  Fee (\$)  Fee Paid (\$)  Fee (\$)  Fee Paid (\$)	
Multiple dependent claims  Total Claims  Extra Claims  Fee (5)  -20 or HP =	
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3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Fur Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Pair	
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4. UINER FEE(S)	<del></del>
Non-English Specification, \$130 fee (no small entity discount)  State (a.e., less filing graphs see). One growth extension of time  \$120	.00
Other (e.g., late filing surcharge): One month extension of time \$120	
SUBMITTED BY	
Skanature Registration No. 53,019 Telephone 312-46	0-500
(Attorney/Agerti)	2002

Name (Print/Type) Joseph H. Herron

This collection of information is fequired by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete. USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete. USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete. USPTO time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent on the amount of time you require to complete.

ADD THIS COMPLETED FORMS TO THIS STATEMENT TO THIS STA